

Fill in this information to identify your case:

Debtor 1	<b>Anthony C Amodei</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF PENNSYLVANIA</u>			
Case number (if known)	<u>19-17804</u>		

Check if this is an amended filing

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount	
2.1 <b>Internal Revenue Service</b> Priority Creditor's Name <b>P.O. Box 7346</b> <b>Philadelphia, PA 19101</b> Number Street City State Zip Code	Last 4 digits of account number	<u>\$8,000.00</u>	<u>\$8,000.00</u>	<u>\$0.00</u>
Who incurred the debt? Check one.	When was the debt incurred?			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	As of the date you file, the claim is: Check all that apply	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
Is the claim subject to offset?		<input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
2.2 <b>Lori Amodei</b> Priority Creditor's Name <b>3716 Mechanicsville Place</b> <b>Philadelphia, PA 19154</b> Number Street City State Zip Code	Last 4 digits of account number	<u>\$1,051.00</u>	<u>\$1,051.00</u>	<u>\$0.00</u>
Who incurred the debt? Check one.	When was the debt incurred?			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	As of the date you file, the claim is: Check all that apply	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:	<input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
Is the claim subject to offset?		<input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Anthony C Amodei

2.3

**Pennsylvania Department of Revenue**

Priority Creditor's Name

110 N 8th St Ste 204bPhiladelphia, PA 19107

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_ **Unknown** **Unknown** **Unknown**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of PRIORITY unsecured claim:**

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

 No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

**Bensalem Rescue Squad, Inc.**

Nonpriority Creditor's Name

PO Box 726New Cumberland, PA 17070-0726

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**Total claim** **\$1,226.70**When was the debt incurred? **11/1/2016**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed
- Type of NONPRIORITY unsecured claim:**
- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Ambulance bill****■ Other. Specify** **Invoice No: 16-283456**

Debtor 1 Anthony C Amodei

4.2

**Capital One**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 30285****Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

4753\$4,792.00

Opened 07/11 Last Active

10/19

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

4.3

**Citibank/The Home Depot**

Nonpriority Creditor's Name

**Attn: Recovery/Centralized****Bankruptcy****Po Box 790034****St Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

2837\$2,161.00

Opened 05/17 Last Active

10/19

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account

4.4

**Credit One Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Department****Po Box 98873****Las Vegas, NV 89193**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

3299\$2,301.00

Opened 07/10 Last Active

11/19

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

Debtor 1 Anthony C Amodei

4.5

**Meenan**

Nonpriority Creditor's Name

**PO Box 70282****Philadelphia, PA 19176-0282**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**8294****\$573.20**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Heating Oil**

4.6

**Rick's Expert Tree Service, Inc.**

Nonpriority Creditor's Name

**1907 Bensalem Blvd.****Bensalem, PA 19020**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**6419****\$550.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Tree Service**

4.7

**Syncb/PPC**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 965060****Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**3139****\$3,378.00**

When was the debt incurred?

**09/19**

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Credit Card**

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Case number (if known)

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4.8

**Synchrony Bank/Care Credit**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 965060  
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

3140**\$2,356.00****Opened 12/17 Last Active  
09/19**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account

4.9

**Synchrony Bank/Sams Club**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 965060  
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

8464**\$2,071.00****Opened 04/15 Last Active  
11/19**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total Claim
			<b>1,051.00</b>
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <b>1,051.00</b>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <b>8,000.00</b>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <b>0.00</b>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <b>9,051.00</b>
Total claims from Part 2	6f. Student loans	6f.	\$ <b>0.00</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <b>0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <b>0.00</b>

Debtor 1 Anthony C Amodei

Case number (if known)

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6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 0.00  
19,408.90

6j. **Total Nonpriority.** Add lines 6f through 6i.

6j. \$ 19,408.90